

# RESIDENCY

## NEWSLETTER

<i>Recruitment Announcements</i>	<i>Inpatient Task Force Director's Corner</i>	<i>Kansas City Update</i>	<i>PCMH news</i>	<i>Global Health Info Upcoming Events</i>
<b>Page 1</b>	<b>Page 2</b>	<b>Page 3</b>	<b>Page 4</b>	<b>Page 5</b>

### Recruitment Update

Interview season is almost underway! A core group of residents will be starting to screen applications for potential interviews in September. Meanwhile, we have clerks here in the E.D., inpatient, and OB departments, so please talk to them about our program and what makes it so unique. Interns, can you believe it's been a year since you had to submit ERAS and go on the interview trail?! We want all classes to be involved with interviewing and ranking in November, so look for emails coming up. Also think about whether your house might be good for hosting an Interview Dinner (with reimbursement for food). Let's recruit another great class for next year! --Geena

P.S. Remember to email all applicant feedback to the following address:  
[applicantfeedback@ccfamilymed.com](mailto:applicantfeedback@ccfamilymed.com)

Congratulations class of 2013!

### Announcements

- **CHO Urgent Care** Friday schedule will be adjusted on the days of all-resident meetings ONLY. The UC resident will work 3-11 PM on those Fridays. Otherwise, the Friday shift will remain the same (1-9 PM). Affected residents will be reminded in advance of each meeting.

- **Alert from the pharmacy:** you no longer need to order Vancomycin troughs when starting Vancomycin. Pharmacy takes care of this aspect of care.

- **Call for proposals!** If you want to propose curriculum changes, RLG will begin accepting proposals in September. See examples on the wiki of past curriculum proposals made by residents.



Best of luck on your new endeavors!

# RESIDENCY NEWSLETTER

## ITF News

As you may have noticed, the trial involving the creation of two "teams" ended early during Block 2. The teams did not meet the objectives of the trial, and were difficult for everyone involved. The greatest success of this trial was the creation of caps across the board, a first for CCRMC. The caps were so well received that just last week the inpatient departments (FMS and IM) have committed to continuing the caps outside of this trial. Right now this is being achieved with an "Overflow" service, rounded on by an

attending who also helps out with morning admissions and triages admits in the afternoon. The staffing of this service in the future has not yet been figured out, but the commitment of the inpatient departments to continuing the caps will necessitate its existence in some form.

The next inpatient trial is currently in the works. This trial will likely start Block 5, and will involve closing the ICU. What it will look like has yet to be determined, and is being worked upon by a committee of residents and attendings from IM, FMS, and

the ICU. The planning committee has identified priorities of patient care, patient safety, and resident education to focus their work. We held a resident forum last week to collect your feedback and concerns, and will make sure they are included in the planning of this trial. Stay tuned!

Abby R

## Director's Corner

Joe, Moni, Jay, Mena and I had a great time in Kansas City at the **AAFP Student/Resident conference** and met interesting students and some of our upcoming clerks. Thanks to the amazing Residency Office staff for organizing. Say a big thank you to your Union Exec Board: thanks to the generous support of PDOCC \$\$ we took 12 students out for dinner.

Interview season planning is well underway, led by Becky Lee and a core group of staff and residents. Let them know if you want to help out! Applications begin rolling in Sept 15.

The **annual Med Staff Dinner is September 20** at 6:30pm at Joaquin Miller Center in Oakland. This is a lovely venue and the band is outstanding. ALL residents are attending for FREE! Make sure you RSVP - email [sue.pfister@hdsd.cccounty.us](mailto:sue.pfister@hdsd.cccounty.us) or [925-313-1137](tel:925-313-1137).

**Brian Johnson became Associate Program Director** as of July 2013. We will soon have some new RLG members and will update you at the next ARM or newsletter.

The **annual ABFM in-training exam** (a practice FM Boards type exam) is the week of Oct 21-25. You will be contacted regarding scheduling. You are all members of AAFP and can access their Boards prep CME online for free - I would encourage R3s to take a look!



Finally, Residents and Staff have been very patient in participating in the summer trials on the inpatient services. Thank you. We continue to work toward permanent resident service size caps with the goal to make the inpatient services more sustainable work for residents and staff and ensure learning > work; no simple task to change a system. I know many of you still find yourselves working excessive hours. We will be rolling out the "excessive duty hours protocol" for residents and staff to begin using over the next weeks. The goal is to identify ways we can help residents get home at a reasonable hour and leave work at work.

Kristin



# RESIDENCY NEWSLETTER

## AAFP Conference 2013 - Kansas City

Hi All- greetings from the annual AAFP conference in Kansas City. This year CCRMC sent four residents to represent: Jay Reinking, Monika Mehrens, Mena Ramos and Joe Mega, as well as Kristin Moeller, the program director!

Overall it felt like a total success. From the opening of the residency expo we had a constant flow of interested future applicants coming to our booth. CCRMC continues to be known around the country as the "cowboy program" and appears to have a very strong reputation. People were very impressed with the full spectrum training we receive as well as the strong global health interest that continues to permeate our training.

Our booth was alongside Santa Rosa and UCSF, so we had the opportunity to represent the full spectrum of UCSF-affiliated programs as well as meet many of the residents at these other programs. This was also effective to visually stratify the residencies given that Santa Rosa sat on the floor without shoes on the entire time.

We also hosted a very successful dinner for people who appeared to be particularly enthusiastic about CCRMC. Our table was completely full of really fantastic applicants who I



felt would all be a great fit at our program. This gave us an opportunity to get to know them more intimately and inform folks about what CCRMC has to offer. Jay also met his doppelgänger!

Saturday morning we closed out the expo and had just as many, if not more, really interesting, excited medical students visit our booth before we closed up at noon.

Overall, it was a fantastic conference and I feel great about the reputation of the program and people's enthusiasm about coming to train at the "cowboy" family medicine program. I'm sure we will see many of these faces again during interview season.

*Joe*



# RESIDENCY NEWSLETTER

## PCMH UPDATE

Dear Residents-

Last Wednesday we met with some members of the multidisciplinary team who helped create the FMC/PCMH rotation. Our goal was to identify stressors in clinic and brainstorm ways to share the care so that residents are better supported and residents and clinic staff are working more as a team. Our group included residents, nurses, psychologists, and preceptors.

Several challenges were identified, including in-basket management, lack of team member roles and expectations, "Establish Care" visits, panel numbers, transfer of care from former third year residents, chronic pain, mental health support and resources, and lack of continuity between nurses and MD's.

We then brainstormed possible solutions, which included improving communication, triaging clinic flow, defining a clear chief complaint, checking in with your nurse mid-visit, when necessary; co-location of MD's and nurses, discussing expectations and needs of all parties, developing shared vision and goals across clinic disciplines, creating a standard resident patient intake, and creating interdisciplinary meetings.

We also discussed the possibility of having a single MTZ resident pilot some of these principles (although this could possibly happen at other sites if there are willing preceptor sponsors).

The pilot could involve

- Resident-Nurse-Care Coordinator co-location during clinic
- Resident and Nurse continuity
- Role clarification and communication.

This pilot is in the brainstorming phase right now and we are working with nursing colleagues and leadership to see if it might work. Sarah McNeil and Alice Lin will be taking over the development of the pilot in Martinez. Danielle Draper and Steven Merjavy have also

expressed interest and all interested residents should be involved.

The lead preceptors will be also working with residents on panel sizes and transfer of third year patients.

Decreasing resident stress in clinic and making clinic sustainable is a long term process but this was a first effort at brainstorming ideas and coming up with some initial steps.

Best,

*Dave and the PCMH/FMC group*

## Congratulations Abby!

Our fellow resident Abby Rardin was recently awarded a Service Excellence Award. She was nominated by a patient's family member "for her compassion and calm demeanor while encouraging a patient to receive treatment." (Directors Report July 2013)



RLG presented the award to her at the 8/6/13 RLG meeting.



## Happy Birthday!

### Blocks 1/2/3

*Jon Powell - July 2*

*Jon Parr - July 20*

*Leah Schweid - July 20*

*Allison Berger - July 21*

*Liz Berryman - July 21*

*Dave Piccinati - Aug 1*

*Stephen Merjavy - Aug 14*

*Courtney Wright - Aug 29*

*Jess Hamilton - Sept 2*

*Kaitlyn Van Arsdell - Sept 6*

*Lauren Wondolowski - Sept 9*

# RESIDENCY NEWSLETTER

## Global Health Update

Dear all,

Please note the recent changes in the Global Health Track/Program of the Contra Costa Family Medicine Residency Program.

### 1. Global Health Advisor

Residents going abroad in their second and third year will be required to pick a Global Health Advisor and have a pre-deployment and post-deployment interview. Brea Bondi-Boyd, our Contra Costa Global Health fellow this year, will send out a list of our volunteer Global Health Advisors in the near future. The Advisor should provide mentorship which is a strong part of our teaching culture at Contra Costa.

### 2. Application for first year residents to apply to the Global Health Track

Applications will be coming in October. The RLG and Global Health Advisory Group will pick 6 candidates to join the track. Members of the Global Health Track can do a overseas global health elective in their second and third year. If you do not get chosen for the track you can still do a third year global health elective and attend all Global Health meetings and events. Brea Bondi-Boyd will be sending out applications.

### 3. Global Health Funds

There are a limited amount of Global Health funds to help sponsor residents/fellows who want to go to the AAFP Global Health Conference October 10th-12th in Baltimore and any resident who wants to do a rotation in Kenya at Sagam Hospital (CCRMC/MGH Global Health Fellowship collaboration). Each resident/fellow will get \$500 to help towards the above endeavors. The money comes from the attendings who paid for the Ultrasound course the last three years. The Ultrasound program is part of the Global Health Program and CCRMC/MGH Global Health Fellowship collaboration. Please discuss with me if you are interested in the above.

If you have any questions please contact me, Brea or any RLG member.

Thanks,  
Neil Jayasekera MD  
Global Health and Ultrasound Director  
Contra Costa Family Medicine Residency Program

Congratulations Rohan and Fumi on the arrival of baby girl Rumi!



Rumi on a 5150 in a kimono straight jacket for Danger to Others (because she's too damn cute)

### UPCOMING EVENTS

- 9/1-11/1 RLG accepting proposals
- 9/13 All-resident meeting
- 9/18, 9/25 ALSO course
- 9/20 Med Staff Dinner
- 10/21-25 In Service Exam
- 11/1 All-resident meeting